

## Address Request Form - City of Santa Fe PO Box 909, 200 Lincoln Ave Santa Fe, NM 87504-0909

Applicant Name:	Request Date:
Telephone No.:cell:	Property Owner's Name:
Fax No:or Email:	Subdivision Name:
5 Copies Plat Attached: Yes No, may delay processing.	Plat Recording Bk & Pg No:
SIGN *Address posted on the entrance of the property. Please notify U.S Postal Service, utility companies etc.  Property Street Name:	Subdivision Phase:  Block No:
Current Address, if any:	Sub-
partment No.:	
Building No.:	
Suite No.:	Yumber of Requested Address(es) At Pro
lumber of Separate Structures At Prog	Property Use:(circle / ttached or R
Property Zoning:	. Toperty osericinotes tractied of R Ined
Improvement Type ggl hily Residential, Guest House cla da Hivision, Condominiums/Apartm	
City Councilor District:   Census District	
5 Copies of Legal Lot of Record and Proposed Plat are documents may be found at the County Clerks Offic (ner Pa	Apartments need both Legal Lot of Record and Site Plan. These
ocated in Historic District:	). 🗸 ,
ocaled in Filatoric District.	/ If Yes, Name of District:
ocated in Escarpment District:	If Yes, Name of District: i.e. Ridgetop or Foothill
ocated in Mountainous & Difficult Terrain Area:	No
Define Archaeological Review Area: Name of area:	_
i.e. Historic Downtown, Rive	er & Trail, or Suburban
Space Below	for City Staff Use Only
Assigned St. Address	
Bldg. No	Apt. / Condo No./ Suites
Date Address Assigned:	
Date Address to H.T.E.:	Assigning Staff:
Date Address to City GIS.:	Delivery Staff:
Date Address to RECC(911) :	Delivery Staff:
Data Addrage to County	Delivery Staff